

ON-SITE DRUG DISPOSAL

**CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF THE INSPECTOR GENERAL
DRUG ENFORCEMENT AND PROFESSIONAL PRACTICES BRANCH
275 EAST MAIN STREET 5ED
FRANKFORT, KY 40621
(502) 564-7985**

- (1) A facility proposing to destroy certain controlled substances must first receive approval from the Cabinet for Health and Family Services (CHFS) and DEA.
- (2) The only drugs which may be destroyed by this method are used injectable products.
- (3) This form must be used for each incident of destruction of controlled substances and must be filled out completely.
- (4) A completely filled out copy of this report must be received and acknowledged by CHFS, Drug Enforcement and Professional Practices Branch (DEPPB) at least 15 days prior to the planned destruction date.
- (5) CHFS, DEPPB and DEA will review the proposed destruction plan.
- (6) Unless notified by CHFS, DEPPB or DEA, the destruction must take place as scheduled. Any deviation will require re-notification of CHFS, DEPPB.
- (7) Agents of CHFS, DEPPB or DEA may, at their discretion, view the destruction of controlled substances and they may take any action necessary to ascertain the veracity of the form.
- (8) After destruction has taken place, a copy of the form completed and signed by the witness should be mailed to CHFS, DEPPB within 5 working days.
- (9) Failure to comply with these guidelines may result in revocation of approval for future on-site destruction.

The following controlled substances are scheduled to be destroyed on _____ (MM/DD/YY)
at _____ (Time) at _____ (Facility Name)

_____ (Address) _____ (City) _____ (County) _____ (Zip)
by _____ (Method of Destruction)

Drug Name	Strength	Quantity
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		

The above listed controlled substances consisting of _____ line-items were destroyed on _____ (MM/DD/YY)
at _____ (Time) at _____ (Location)

Pharmacist: _____
Name (Please Type or Print)

Witness: _____
Name (Please Type or Print)

Title

Title

Signature

Signature